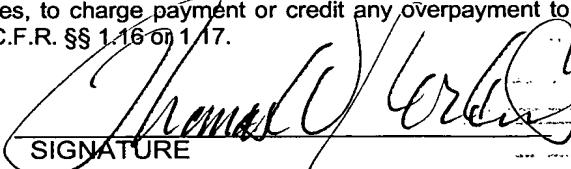


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| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371 | | Attorney Docket No. 0518-1149 U.S. Application No. 10/7535173 |
| INTERNATIONAL APPLN. NO. PCT/FR2003/050092 | INTERNATIONAL FILING DATE October 15, 2003 | PRIORITY DATE CLAIMED November 15, 2002 |
| TITLE OF INVENTION: OCCLUSIVE DEVICE FOR MEDICAL OR SURGICAL USE | | |
| APPLICANT(S) FOR DO/EO/US: Claude MIALHE | | |
| Applicant herewith submits to the United States Designated Elected Office (DO/EO/US) the following items and other information: | | |
| <p>1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371.</p> <p>3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.</p> <p>4. <input checked="" type="checkbox"/> The US has been elected (Article 31).</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2)) a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input checked="" type="checkbox"/> has been communicated by the International Bureau. See attached PCT/IB/308. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).</p> <p>6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)) a. <input checked="" type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).</p> <p>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3)) a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made, however, the time limit for making such amendments has NOT expired. d. <input type="checkbox"/> have not been made and will not be made.</p> <p>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)).</p> <p>9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4))</p> <p>10. <input type="checkbox"/> A Declaration of Inventorship for purposes of U.S.A. designation pursuant to rule 4.17(iv).))</p> <p>11. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).</p> | | |
| Items 11 to 20 below concern document(s) or information included: | | |
| <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) w/PTO-1449 - <input type="checkbox"/> Copy of IDS citations.</p> <p>13. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)).</p> <p>14. <input checked="" type="checkbox"/> A preliminary amendment.</p> <p>15. <input checked="" type="checkbox"/> An Application Data Sheet under 37 C.F.R. 1.76.</p> <p>16. <input checked="" type="checkbox"/> Itemized Return Receipt Postcard</p> <p>17. <input type="checkbox"/> A substitute specification.</p> <p>18. <input type="checkbox"/> Power of Attorney and Statement under 37 CFR §3.73(b) a. <input type="checkbox"/> Newly executed Power of Attorney b. <input type="checkbox"/> A change of Power of Attorney and/or change of address letter.</p> <p>19. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825.</p> <p>20. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4).</p> <p>21. <input type="checkbox"/> A second copy of the English language translation of the international application (35 U.S.C. 154(d)(4)).</p> <p>22. <input checked="" type="checkbox"/> Other items or information: <u>Abstract, International Search Report</u></p> | | |

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| U.S. APPLICATION NO. 10/535173 | INTERNATIONAL APPLN. NO. PCT/FR2003/050092 | ATTORNEY DOCKET NO. 0518-1149 | | | |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input checked="" type="checkbox"/> The following fees are submitted: | | CALCULATIONS PTO USE ONLY | | | |
| PCT FEES - NATIONAL STAGE | | | | | |
| <u>Fee Description</u> | | | | | |
| Basic National Stage Fee | | \$150.00 | | | |
| Non ISA/US Search Provided | | National Stage Search Fee | | | |
| <input type="checkbox"/> US was the IPEA And all claims satisfied the provisions of PCT Article 33 (1)-(4) | | National Stage Examination Fee | | | |
| Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20- <input type="checkbox"/> 30 months from the earliest claimed priority date (Fee Code 1617/2617) | | \$0.00 | | | |
| National Stage Application size fee each additional 50 sheets in excess of 100 Fee Code 1681/2681 | Additional Sheets $15 - 100 = \underline{\hspace{2cm}} = \underline{\hspace{2cm}} \times 50$ | Fee From Below <u>\$125.00</u> \$0.00 | | | |
| CLAIMS Independent Claims Fee Codes 1614 / 2614 | | NUMBER FILED 1 - 3 = <u> </u> | NUMBER EXTRA <u> </u> | RATE $x \$100.00$ | \$0.00 |
| Total Claims | Fee Codes 1615 / 2615 | 15 - 20 = <u> </u> | | $x \$25.00$ | \$0.00 |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable) Fee Code 1616 / 2616 | | | | $+ \$360.00$ | \$0.00 |
| Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).Fee Code 1618 | | | | \$0.00 | |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). (Fee code 8021) \$40.00 per property | | | | $+ \$0.00$ | |
| | | | | TOTAL FEES ENCLOSED = <u> </u> | \$450.00 |
| | | | | Amount to be refunded: | \$ |
| | | | | Charged: | \$ |
| <input checked="" type="checkbox"/> A check in the amount of \$450.00 to cover the above fees is attached. <input type="checkbox"/> The Director is hereby authorized to charge indicated fees and credit any overpayment to Deposit Account No. 25-0120 in the name of Young & Thompson. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 25-0120 for any additional fee required under 37 C.F.R. §§ 1.16 or 1.17. | | | | | |
| SEND ALL CORRESPONDENCE TO: YOUNG & THOMPSON 745 South 23 rd Street Arlington, VA 22202 Telephone: (703) 521-2297 Facsimile: (703) 685-0573 | |  SIGNATURE Thomas W. Perkins, Reg. No. 33,027 NAME, REGISTRATION NUMBER | | | |
| Y&T Customer No. 00466 TWP/yr | | May 16, 2005 DATE | | | |